

N14000003318

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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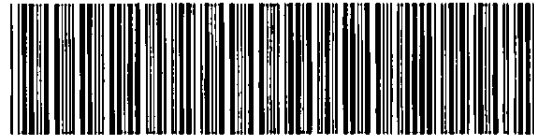
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

SEP 26 2018  
S. YOUNG

COVER LETTER

TO: Amendment Section.  
Division of Corporations

NAME OF CORPORATION: FALCON DEBATE BOOSTER ORGANIZATION INC.

DOCUMENT NUMBER: N1400000 3318

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARGARET HARRIS

(Name of Contact Person)

FALCON DEBATE BOOSTER ORG. INC.

(Firm/ Company)

2134 N.W. 129 AVENUE

(Address)

PEMBROKE PINES, FL 33028

(City/ State and Zip Code)

holnessharris@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NANCY GOLD

(Name of Contact Person)

at

954 683 1062

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |  |   |   |  |
|--|---|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>Enclosed) |
|--|---|---|--|

Mailing Address

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Articles of Amendment  
to  
Articles of Incorporation  
of

FALCON DEBATE BOOSTER ORGANIZATION INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

N 14000003318

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

N/A

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

2134 N.W. 129 Ave

PEMBROKE PINES

FL 33028

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

SAME AS ABOVE

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

MARGARET HARRIS

2134 N.W. 129 AVENUE

(Florida street address)

New Registered Office Address:

PEMBROKE PINES, Florida 33028

(City)

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.



Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title.

P - President; V - Vice President; T - Treasurer; S - Secretary; D - Director; TR - Trustee; C - Chairman or Clerk; CEO - Chief Executive Officer; CFO - Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action  
(Check One)

Title

Name

Address

1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>PRESIDENT</u>	<u>LORI HALPERN</u>	<u>13294 N.W. 18 CT</u> <u>PEMBROKE PINES</u> <u>FL 33028</u>
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>1 VP</u>	<u>GABRIELA GARCIA</u>	<u>231 NW 151 AVENUE</u> <u>PEMBROKE PINES</u> <u>FL 33028</u>
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>2 VP</u>	<u>PATRICIA LOPEZ</u>	<u>9381 NW 14 CT</u> <u>PEMBROKE PINES</u> <u>FL 33024</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>PRESIDENT</u>	<u>MARGARET HARRIS</u>	<u>2134 N.W. 129 AVE</u> <u>PEMBROKE PINES</u> <u>FL 33028</u>
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>1 VP</u>	<u>JANET GUGGINO</u>	<u>1791 N.W. 108 AVENUE</u> <u>PEMBROKE PINES</u> <u>FL 33026</u>

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If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

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<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action  
(Check One)

Title

Name

Address

- |   |                  |                       |                                      |
|---|------------------|-----------------------|--------------------------------------|
| 1) <input type="checkbox"/> Change      | <u>2 VP</u>      | <u>DIANA K HAN</u>    | <u>501 S. 28<sup>TH</sup> AVENUE</u> |
| <input checked="" type="checkbox"/> Add |                  |                       | <u>HOLLYWOOD</u>                     |
| <input type="checkbox"/> Remove         |                  |                       | <u>FL 33020</u>                      |
| 2) <input type="checkbox"/> Change      | <u>SECRETARY</u> | <u>ANGELA ROBERTS</u> | <u>913 SW 101 WAY</u>                |
| <input checked="" type="checkbox"/> Add |                  |                       | <u>PEMBROKE PINES, FL</u>            |
| <input type="checkbox"/> Remove         |                  |                       | <u>FL 33025</u>                      |
| 3) <input type="checkbox"/> Change      | _____            | _____                 | _____                                |
| <input type="checkbox"/> Add            |                  |                       | _____                                |
| <input type="checkbox"/> Remove         |                  |                       | _____                                |
| 4) <input type="checkbox"/> Change      | _____            | _____                 | _____                                |
| <input type="checkbox"/> Add            |                  |                       | _____                                |
| <input type="checkbox"/> Remove         |                  |                       | _____                                |
| 5) <input type="checkbox"/> Change      | _____            | _____                 | _____                                |
| <input type="checkbox"/> Add            |                  |                       | _____                                |
| <input type="checkbox"/> Remove         |                  |                       | _____                                |
| 6) <input type="checkbox"/> Change      | _____            | _____                 | _____                                |
| <input type="checkbox"/> Add            |                  |                       | _____                                |
| <input type="checkbox"/> Remove         |                  |                       | _____                                |

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

N/A

N/A

The date of each amendment(s) adoption: MAY 21, 2018, if other than the date this document was signed.

Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) **(CHECK ONE)**

- ☒ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- ☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 9/10/18

Signature Margaret Harris  
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

MARGARET HARRIS  
(Typed or printed name of person signing)

PRESIDENT  
(Title of person signing)